Case 2:17-bk-20805-SK Doc 1 Filed 09/01/17 Entered 09/01/17 16:07:16 Des

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jermall First name D. Middle name		First name Middle name
	Bring your picture identification to your meeting with the trustee.	Morgan Last name and Suffix (Sr., Jr., II, III)	<u> </u>	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9218		

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Debtor 1 **Jermall D. Morgan**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs. Business name(s)			
		Business name(s)				
		EINs	EINs			
5.	Where you live	12627 Eucalyptus Avenue, #141	If Debtor 2 lives at a different address:			
		Hawthorne, CA 90250 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Los Angeles				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Page 3 of 56 Main Document Debtor 1 Jermall D. Morgan Case number (if known) Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

□ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Main Document Page 4 of 56 Debtor 1 Jermall D. Morgan Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jermall D. Morgan Case number (if known)

Part 5: Explain

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Den	Jerman D. Worgan	1		Case num	Jei (II kriowii)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses s?			
	administrative expenses		■ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		1 ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000	5 0,001-100,000			
		□ 100-1		□ 10,001-25,000	☐ More than100,000			
		□ 200-9	199					
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,			more than too silien			
20.	How much do you estimate your liabilities	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
		Δ ψοσο,			·			
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		not an attorney to help me fill out this						
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	pecified in this petition.			
		bankrupt and 357	tcy case can result in fines up 1.	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	r or property by fraud in connection with a pears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			nall D. Morgan I D. Morgan	Signature of Deb	tor 2			
			e of Debtor 1	Signature of Deb				
		Executed	d on September 1, 2017	7 Executed on				
			MM / DD / YYYY	<u> </u>	M / DD / YYYY			

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Debtor 1 Jermall D. Morgan Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Steven B Lever Signature of Attorney for Debtor	Date	September 1, 2017 MM / DD / YYYYY
Steven B Lever		
Printed name		
Law Offices of Steven B. Lever		
Firm name		
200 Pine Avenue, Suite 620		
Long Beach, CA 90802		
Number, Street, City, State & ZIP Code		
Contact phone (562) 436-5456	Email address	sblever@leverlaw.com
155082		
Bar number & State		

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None I declare, under penalty of perjury, that the foregoing is true and correct. Executed at Long Beach , California. /s/ Jermall D. Morgan Jermall D. Morgan Date: September 1, 2017 Signature of Debtor

Signature of Joint Debtor

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Jermall D. Morga	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	75,768.82
	1c. Copy line 63, Total of all property on Schedule A/B	\$	75,768.82
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	57,699.28
	Your total liabilities	\$	57,699.28
Par	t 3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,125.13
i.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,406.60
aı	t 4: Answer These Questions for Administrative and Statistical Records		
S .	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7 .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for		familia an

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 **Jermall D. Morgan** Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$______4,414.38

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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			Main Docu	ment Page 11 of 56)		
Fill in tl	his info	ormation to identify your	case and this filing:				
Debtor	1	Jermall D. Morgai	n				
Dobtoi	•	First Name	Middle Name	Last Name			
Debtor :							
(Spouse, i	if filing)	First Name	Middle Name	Last Name			
United S	States	Bankruptcy Court for the:	CENTRAL DISTRICT OF	F CALIFORNIA			
0		•				_	
Case nu	umber					_	theck if this is an mended filing
						~	
Offic	ial F	orm 106A/B					
Sch	edu	ıle A/B: Prop	ertv				12/15
				once. If an asset fits in more than or	ne category, list the asset i	in the cate	egory where you
	on. If m	ore space is needed, attach		ed people are filing together, both ar m. On the top of any additional page			
			Landa Otto Bart Franc	. V. O II I was a la			
Part 1:	Descri	be Each Residence, Building	, Land, or Other Real Estate	e You Own or Have an Interest In			
. Do yo	u own c	or have any legal or equitable	interest in any residence,	building, land, or similar property?			
.	. Go to F	2.40					
_							
☐ Yes	s. Wher	re is the property?					
Part 2:	Descril	be Your Vehicles					
□ No ■ Ye							
3.1 N	Лаке:	Lexus	Who has an inte	rest in the property? Check one	Do not deduct secured the amount of any secu		
N	/lodel:	GS300	■ Debtor 1 only		Creditors Who Have Cl		
Υ	ear:	2006	☐ Debtor 2 only		Current value of the	Curre	ent value of the
	• •	nate mileage: 205			entire property?	portio	on you own?
_		ormation:	At least one of	f the debtors and another			
1	nileag	ion is consistent with e	Check if this (see instructions	is community property	\$6,089.00	- —	\$6,089.00
Exam	ples: B			nal vehicles, other vehicles, and ssels, snowmobiles, motorcycle ac			
■ No							
☐ Ye	S						
E 744	the de	llar value of the portion v	you own for all of your o	ntrice from Bort 2 including on	, antring for		
				ntries from Part 2, including any			\$6,089.00
, 3	- ,						
Part 3:	Descril	be Your Personal and House	hold Items				
Do you	own c	or have any legal or equita	able interest in any of th	e following items?			t value of the
							you own? deduct secured
							or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 2:17- Jermall D. N		Doc 1 Filed 09 Main Document		Entered 09/01 12 of 56 Case numbe		Desc
_	. Describe	iorgan			Case Hambe		
• res	. Describe					_	
		Normal and cust	tomary household god	ods and fur	nishings		\$2,000.00
□ No	oles: Televisions a including cel	and radios; audio, vide I phones, cameras, mo	eo, stereo, and digital equip edia players, games	oment; compu	uters, printers, scanne	rs; music collections;	electronic devices
■ Yes	. Describe						
		1 TV, 1 laptop co surround system	omputer, 1 tablet comp n for TV	outer, 1 Sa	msung phone,		\$500.00
Exam _p □ No		l figurines; paintings, ρ ons, memorabilia, coll	orints, or other artwork; bod lectibles	bks, pictures,	or other art objects; s	tamp, coin, or baseba	III card collections;
		None				7	\$0.00
Exam _p □ No	nent for sports a oles: Sports, photo musical instr	ographic, exercise, and	d other hobby equipment;	bicycles, poo	l tables, golf clubs, ski	s; canoes and kayaks	s; carpentry tools;
		None]	\$0.00
□ No			ion, and related equipment	t			\$300.00
□ No		othes, furs, leather co	oats, designer wear, shoes,	accessories			
		Normal and cust	tomary wearing appar	el			\$300.00
□ No			y, engagement rings, wed		eirloom jewelry, watche	es, gems, gold, silver	* 4 *** ***
		Diamond earring	gs \$750; diamond ring	\$250			\$1,000.00
Exan ■ No	arm animals nples: Dogs, cats, . Describe	birds, horses					
14. Any o ■ No	other personal ar	d household items y	you did not already list, in	ncluding any	health aids you did	not list	

Official Form 106A/B Schedule A/B: Property page 2

Case 2:1			1 Filed 09/01/17 Entered 09/01/17 16 Document Page 13 of 56	
Debtor 1 Jermall D.			Case number (if known	
☐ Yes. Give specific	information.			
			rt 3, including any entries for pages you have attached	\$4,100.00
Part 4: Describe Your Fin	ancial Assot	e		
Do you own or have an			ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money yo □ No ■ Yes		•	ne, in a safe deposit box, and on hand when you file your pet	ition
			Cash	\$500.00
			ints; certificates of deposit; shares in credit unions, brokerage with the same institution, list each. Institution name:	houses, and other similar
	17.1.	Checking	Chase Bank	\$1,600.00
	17.2.	Savings	Chase Bank	\$500.00
	17.3.	HSA	Equity Trust	\$492.13
	17.4.	HSA	iPlan	\$2,800.00
	17.5.	Checking and Savings	Southland Credit Union	\$1,800.00
	17.6.	Checking and Savings	USCCU - University of Souther California Credit Union	\$4,600.00
18. Bonds, mutual fund Examples: Bond fund ■ No □ Yes			erage firms, money market accounts	
	stock and	interests in incorpor	ated and unincorporated businesses, including an intere	est in an LLC, partnership, and
■ Yes. Give specific		about them ne of entity:	 % of ownership:	
	CO		Nevada LLC a party to a Iment land contract with no	\$0.00

Official Form 106A/B Schedule A/B: Property

page 3

Case 2:17-bk-20805-SK Doc 1 Filed 09/01/17 Entered 09/01/17 16:07:16 Main Document Page 14 of 56 Debtor 1 Jermall D. Morgan Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **Brokerage TD Ameritrade** \$2.864.28 457 **OCTA** \$4.291.85 Roth IRA **Equity Trust** \$2,493.00 Roth IRA iPlan \$2.800.00 Pension **OCRS** \$35,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. Rent **Landlord Security Deposit** \$1,000.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

page 4

Debtor 1	Case 2:17-bk-20805-S Jermall D. Morgan		/17 Entered 09/01/17 16 Page 15 of 56 Case number (if known)	
28. Tax r	efunds owed to you			
□ No				
■ Yes	s. Give specific information about the	em, including whether you already f	iled the returns and the tax years	
		Potential Federal & State Rev 2017	fund for Taxes Federal and St	ate \$4,000.00
		2011	i ederar and St	αι ς Ψ+,000.00
Exan ■ No	ly support nples: Past due or lump sum alimon	y, spousal support, child support, m	aintenance, divorce settlement, propert	y settlement
Exan	r amounts someone owes you nples: Unpaid wages, disability insur benefits; unpaid loans you ma		sick pay, vacation pay, workers' compe	ensation, Social Security
31. Intere	ests in insurance policies	ance; health savings account (HSA)	; credit, homeowner's, or renter's insura	ince
■ Yes	s. Name the insurance company of e Company na		Beneficiary:	Surrender or refund value:
		nsurance Whole Life Policy nefit of \$50,000 cash value	Gerald Morgan	\$838.56
If you some	nterest in property that is due you use the beneficiary of a living trust, eone has died. S. Give specific information		nce policy, or are currently entitled to red	eive property because
Exan ■ No	ns against third parties, whether on the second place. Accidents, employment dispusses. Describe each claim			
■ No	r contingent and unliquidated clai	ms of every nature, including co	unterclaims of the debtor and rights t	o set off claims
	inancial assets you did not alread	ly list		
☐ Yes	s. Give specific information			
	I the dollar value of all of your ent Part 4. Write that number here		ntries for pages you have attached	\$65,579.82
Part 5: D	Describe Any Business-Related Proper	ty You Own or Have an Interest In. Lis	st any real estate in Part 1.	
37. Do yo u	ı own or have any legal or equitable in	terest in any business-related proper	ty?	
	Go to Part 6.			
☐ Yes.	Go to line 38.			

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

\$0.00

\$0.00

Copy personal property total

\$75,768.82

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

59.

60.

61.

\$75,768.82

\$75,768.82

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor					
Debtor 1	Jermall D. Morga	n			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		CENTRAL DISTRICT OF CALIFORNIA			
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	You Claim	as Exempt
---------	----------	--------------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che			
2006 Lexus GS300 205000 miles condition is consistent with mileage	\$6,089.00	•	\$5,350.00	C.C.P. § 703.140(b)(2)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
2006 Lexus GS300 205000 miles condition is consistent with mileage	\$6,089.00		\$739.00	C.C.P. § 703.140(b)(5)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Normal and customary household goods and furnishings	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(3)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
1 TV, 1 laptop computer, 1 tablet computer, 1 Samsung phone,	\$500.00		\$500.00	C.C.P. § 703.140(b)(3)	
surround system for TV Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Smith & Wesson .40 caliber pistol Line from Schedule A/B: 10.1	\$300.00		\$300.00	C.C.P. § 703.140(b)(5)	
Line from Schedule PVD. 10.1			100% of fair market value, up to any applicable statutory limit		

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tor 1 Jermall D. Morgan	Main Documer	π	Page 18 01 56 Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Normal and customary wearing apparel	\$300.00		\$300.00	C.C.P. § 703.140(b)(3)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Diamond earrings \$750; diamond ring \$250	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(4)
ine from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$500.00	-	\$500.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Line from Schedule A/B: 17.1	\$1,600.00	•	\$1,600.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Savings: Chase Bank Line from Schedule A/B: 17.2	\$500.00		\$500.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
HSA: Equity Trust Line from Schedule A/B: 17.3	\$492.13	•	\$492.13	C.C.P. § 703.140(b)(5)
2			100% of fair market value, up to any applicable statutory limit	
HSA: iPlan Line from Schedule A/B: 17.4	\$2,800.00		\$2,800.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking and Savings: Southland Credit Union	\$1,800.00		\$1,800.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
Checking and Savings: USCCU - University of Souther California	\$4,600.00		\$4,600.00	C.C.P. § 703.140(b)(5)
Credit Union Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit	
Brokerage: TD Ameritrade Line from Schedule A/B: 21.1	\$2,864.28		\$2,864.28	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
457: OCTA Line from Schedule A/B: 21.2	\$4,291.85		\$4,291.85	C.C.P. § 703.140(b)(10)(E)
			100% of fair market value, up to any applicable statutory limit	
Roth IRA: Equity Trust Line from Schedule A/B: 21.3	\$2,493.00		\$2,493.00	C.C.P. § 703.140(b)(10)(E)
			100% of fair market value, up to any applicable statutory limit	

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De	Jennan D.	. Morgan					
	Schedule A/B that lists this property p		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che			
	Roth IRA: iPlan	='	\$2,800.00		\$2,800.00	C.C.P. § 703.140(b)(10)(E)	
	Line nom conedar	10 / V D. = 11 1			100% of fair market value, up to any applicable statutory limit		
	Pension: OCRS		\$35,000.00		\$35,000.00	C.C.P. § 703.140(b)(10)(E)	
	Line Irom Schedul	IG PVD. 21.3			100% of fair market value, up to any applicable statutory limit		
		Security Deposit	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(5)	
	Line from Schedule A/B: 22.1	le AVD. 22. I			100% of fair market value, up to any applicable statutory limit		
		ate: Potential Federal for Taxes 2017	\$4,000.00		\$4,000.00	C.C.P. § 703.140(b)(5)	
	Line from Schedul				100% of fair market value, up to any applicable statutory limit		
		ance Whole Life Policy of \$50,000 cash value	\$838.56		\$838.56	C.C.P. § 703.140(b)(8)	
	838.56 Beneficiary: Gerald Morgan Line from Schedule A/B: 31.1				100% of fair market value, up to any applicable statutory limit		
3.		a homestead exemption ment on 4/01/19 and every			led on or after the date of adjustmer	nt.)	
	■ No	,	•		•	•	
	☐ Yes. Did you	acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No		•		•		
	☐ Yes						

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Fill in this infor				
Debtor 1	Jermall D. Morga	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Main Document	Page	21 of 56	
Fill in thi	s information to identify your	case:			
Debtor 1	Jermall D. Morga	n			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	ling) First Name	Middle Name	Last Name		
	3,				
United St	ates Bankruptcy Court for the:	CENTRAL DISTRICT OF CALI	FORNIA		
Case nur	nber				
(if known)					Check if this is an
					amended filing
Official	Form 106E/F				
Sched	ule E/F: Creditors W	ho Have Unsecured	Claims		12/15
Schedule (Schedule I left. Attach name and	6: Executory Contracts and Unexp b: Creditors Who Have Claims Sec the Continuation Page to this page case number (if known).	oired Leases (Official Form 106G). Do Tured by Property. If more space is n Je. If you have no information to rep	o not include eeded, copy	contracts on Schedule A/B: Property (O any creditors with partially secured cla the Part you need, fill it out, number the do not file that Part. On the top of any a	ims that are listed in entries in the boxes on the
Part 1:	List All of Your PRIORITY Ur				
_	y creditors have priority unsecure	d claims against you?			
■ No	. Go to Part 2.				
Part 2:	s. List All of Your NONPRIORIT	V Unsecured Claims			
	y creditors have nonpriority unse				
_			our other och	adula a	
		eart. Submit this form to the court with y	our other sche	edules.	
Ye	S.				
unsec	ured claim, list the creditor separatel ne creditor holds a particular claim, I	y for each claim. For each claim listed,	identify what	holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out	included in Part 1. If more
					Total claim
	merican Express	Last 4 digits of acco	ount number	2003	\$1,036.28
	onpriority Creditor's Name	When was the debt	incurred?	various	
-	6 General Warren Blvd.	When was the dest	iliculteu:	Various	
	Malvern, PA 19355				
	umber Street City State Zlp Code /ho incurred the debt? Check one.	As of the date you for	ile, the claim	s: Check all that apply	
_	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
_	At least one of the debtors and an	T (NONDRIOR	TY unsecure	d claim:	
	Check if this claim is for a com	По			
d	ebt the claim subject to offset?		g out of a sepa	ration agreement or divorce that you did n	ot
_	No	_		g plans, and other similar debts	
	Yes	Other. Specify		•	
-		- Other, Specify		•	

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Page 22 of 56 Main Document Case number (if know) Debtor 1 Jermall D. Morgan 4.2 **Amex** Last 4 digits of account number 9443 \$9,659.00 Nonpriority Creditor's Name Correspondence Opened 02/11 Last Active Po Box 981540 When was the debt incurred? 7/13/17 El Paso, TX 79998 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Bank Of America** Last 4 digits of account number 3968 \$11,596.00 Nonpriority Creditor's Name Nc4-105-03-14 Opened 02/15 Last Active Po Box 26012 When was the debt incurred? 6/05/17 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 \$6,858.00 **Capital One** Last 4 digits of account number 0998 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/15 Last Active Po Box 30253 When was the debt incurred? 6/06/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Chase Card	Last 4 digits of account number	6219	\$3,265.0
Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 04/09 Last Active 7/03/17	. ,
Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citicards Cbna	Last 4 digits of account number	8685	\$190.0
Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 02/11 Last Active 6/08/17	
Saint Louis, MO 63179			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	<u>_</u>		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	■ Other Specify Credit Card	I	
Discover Financial	Last 4 digits of account number	8006	\$2,527.0
Nonpriority Creditor's Name		Opened 02/45 Leet Active	
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 02/15 Last Active 7/05/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	_	aration agreement or divorce that you did not	

■ No ☐ Yes

■ Other. Specify Credit Card

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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1 Jermall D. Morgan		Case number (if know)	
Elan Financial Service	Last 4 digits of account number	1967	\$7,176.00
Nonpriority Creditor's Name Cb Disputes Saint Louis, MO 63166	When was the debt incurred?	Opened 02/15 Last Active 6/06/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separate	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Navy Federal Cr Union	Last 4 digits of account number	7187	\$1,987.00
Nonpriority Creditor's Name Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 03/15 Last Active 7/07/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	1	
Regions Bankcard	Last 4 digits of account number	0150	\$3,052.00
Nonpriority Creditor's Name Attn: Bankruptcy 1900 5th Ave N #300	When was the debt incurred?	Opened 02/11 Last Active 6/07/17	
Birmingham, AL 35203 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	i	
	J Jp Jon y		

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Debtor 1	Jermall D. Morgan		Case number (if knov

Usc Credit Union	Last 4 digits of account number	0600	\$10,353.0
Nonpriority Creditor's Name 3720 S Flower St FI 4 Los Angeles, CA 90007	When was the debt incurred?	Opened 05/10 Last Active 6/29/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Check Cred	lit Or Line Of Credit	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	57,699.28
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	57,699.28

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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			<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jermall D. Morga			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Fill in thi	s information to identify your o	case:			
Debtor 1	Jermall D. Morgar	1			
Dahtar 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	CENTRAL DISTRICT OF C	CALIFORNIA		
Case nun	nber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Code	ebtors			12/15
people are fill it out, a your name	and number the entries in the e and case number (if known). you have any codebtors? (If y	illy responsible for supplyi boxes on the left. Attach th Answer every question.	ng correct informat e Additional Page t	tion. If more space is need to this page. On the top of	eded, copy the Additional Page,
☐ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
☐ No	o. Go to line 3.				
■ Ye	s. Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
	■ No				
	Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and	current address of that person.
	Name of your spouse, former spo Number, Street, City, State & Zip				
in lin Form	e 2 again as a codebtor only if	that person is a guarantor	or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	² Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1	Name			□ Schedule D, line □ Schedule E/F, line □ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Name			□ Schedule D, line □ Schedule E/F, line □ Schedule G, line	
	Number Street City	State	ZIP Code		

Fill	in this information to identify your	case:		I			
	otor 1 Jermall D.						
	otor 2 puse, if filing)						
Uni	ted States Bankruptcy Court for th	e: CENTRAL DISTRICT	OF CALIFORNIA				
(If kr	se number		-	□ Ar		d filing Int showing postposts Ins of the following	•
	fficial Form 106l chedule I: Your Ind			MI	M / DD/ Y`	YYY	
sup spo atta Par	plying correct information. If youse. If you are separated and youch a separate sheet to this form The describe Employmen	u are married and not filit our spouse is not filing w . On the top of any additi	pple are filing together (Debtor 1 ng jointly, and your spouse is liv ith you, do not include informati onal pages, write your name and	ing with yon about	you, inclu your spo	ide information a use. If more spa	about your ce is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spe	ouse
	If you have more than one job, attach a separate page with				☐ Emplo		
	information about additional employers.		☐ Not employed		☐ Not employed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Bus Driver OCTA				
	Occupation may include student or homemaker, if it applies.	Employer's address	550 S. Main Street Orange, CA 92868				
		How long employed t	here? 13 years		_		
Pai	t 2: Give Details About Mo	onthly Income					
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to report for any	line, write	\$0 in the	space. Include yo	ur non-filing
	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information for all empl	oyers for t	hat persor	n on the lines belo	w. If you need
				For Deb	tor 1	For Debtor 2 o	
2.	List monthly gross wages, sal deductions). If not paid monthly			4,	414.38	\$	N/A
3.	Estimate and list monthly ove	rtime pay.	3. +\$		0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

4. **\$ 4,414.38**

N/A

Deb	tor 1	Jermall D. Morgan	-	(Case	number (if know	vn)				
					For	Debtor 1			Debtor		
	Сор	y line 4 here	4.		\$	4,414.	38	\$	9	N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	777.	50	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$ -	356.8		\$ 		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$ -	54.		<u>\$</u> —		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.0		\$		N/A	_
	5e.	Insurance	5e	.	\$	36.2		\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.0		\$		N/A	_
	5g.	Union dues	5g	J.	\$	64.	50	\$	-	N/A	-
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.0	00	+ \$		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	1,289.2	25	\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,125.	13	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	0.0	20	\$		N/A	
	8b.	Interest and dividends	8b		\$ -	0.0		\$-		N/A	_
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	8c 8d 8e	i.	\$_ \$_ \$_	0.0 0.0 0.0	00	\$ \$		N/A N/A N/A	<u> </u>
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	-	\$	0.0	00	\$		N/A	
	8g.	Pension or retirement income	8g		\$	0.0		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.0	00	+ \$		N/A	<u>.</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	,	\$	0.0	00	\$		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	Φ.		3,125.13 +	¢		N/A		3.125.13
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		3,123.13	Ψ-		IN/A	_	3,123.13
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•			Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	3,125.13
13.	Doy	ou expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No. Yes Explain:									

	in this information	Construction of Construction				i			
Deb		tion to identify yo				Ch	eck if this is:		
Deb	101 1	Jermall D. M	organ				An amended filing	α	
Deb	tor 2						A supplement sho	owing postpetition chapter	
(Spc	ouse, if filing)						13 expenses as o	of the following date:	
Unite	ed States Bankri	uptcy Court for the	: CENTR	AL DISTRICT OF CALIF	ORNIA		MM / DD / YYYY		
!	e number nown)								
	ficial Fo	rm 106J							
		J: Your			filim n to mathem b	-41		12/1	5
info	rmation. If m		eded, atta	. If two married people a ch another sheet to this n.					
Part	1: Descr	ibe Your House	hold						
1.	Is this a join								_
	■ No. Go to	line 2.							
	☐ Yes. Doe s	s Debtor 2 live i	in a separ	ate household?					
	□ No		st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.		
•									
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents i	names.						_ □ Yes □ No	
								□ No □ Yes	
								_ □ res □ No	
								☐ Yes	
							_	□ No	
								_ Yes	
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes					
Pari	t 2: Estima	ate Your Ongoi	na Monthi	v Fynenses					
Esti exp	imate your ex	penses as of yo	our bankr	uptcy filing date unless				hapter 13 case to report of the form and fill in the	_
Incl	uda avnansa	s naid for with I	non-cash	government assistance	if you know				
				cluded it on Schedule I:					
(Off	icial Form 10	6I.)					Your ex	penses	
4.		r home owners		ses for your residence.	Include first mortgag	e 4.	\$	1,210.00	
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a.	\$	0.00	
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00	
		•		ıpkeep expenses		4c.	\$	20.00	
_		owner's associat				4d.		0.00	
5.	Additional n	nortgage payme	ents for yo	our residence , such as h	ome equity loans	5.	\$	0.00	

Debtor 1 Jermall D. Morgan	Case number (if known)				
6. Utilities:					
6a. Electricity, heat, natural gas	6a. \$	75.00			
6b. Water, sewer, garbage collection	6b. \$	25.00			
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	435.00			
6d. Other. Specify:	6d. \$	0.00			
Food and housekeeping supplies	7. \$	300.00			
Childcare and children's education costs	8. \$	0.00			
Clothing, laundry, and dry cleaning	9. \$	150.00			
Personal care products and services	10. \$	100.00			
. Medical and dental expenses	11. \$	80.00			
Transportation. Include gas, maintenance, bus or train fare.		00.00			
Do not include car payments.	12. \$	350.00			
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	200.00			
Charitable contributions and religious donations	14. \$	0.00			
i. Insurance.					
Do not include insurance deducted from your pay or included in lines 4 or 20.					
15a. Life insurance	15a. \$	59.00			
15b. Health insurance	15b. \$	80.00			
15c. Vehicle insurance	15c. \$	175.00			
15d. Other insurance. Specify: Disability	15d. \$	88.66			
. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.					
Specify:	16. \$	0.00			
7. Installment or lease payments:					
17a. Car payments for Vehicle 1	17a. \$	0.00			
17b. Car payments for Vehicle 2	17b. \$	0.00			
17c. Other. Specify:	17c. \$	0.00			
17d. Other. Specify:	17d. \$	0.00			
Your payments of alimony, maintenance, and support that you did not report	as	0.00			
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		0.00			
Other payments you make to support others who do not live with you.	\$	0.00			
Specify:	19.				
Other real property expenses not included in lines 4 or 5 of this form or on S					
20a. Mortgages on other property	20a. \$	0.00			
20b. Real estate taxes	20b. \$	0.00			
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00			
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00			
20e. Homeowner's association or condominium dues	20e. \$	0.00			
. Other: Specify: Gym	21. +\$	9.00			
Postage/packing, finance charges/ misc.	+\$	50.00			
. Calculate your monthly expenses					
22a. Add lines 4 through 21.	\$	3,406,66			
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-		3,700.00			
	·	2 400 00			
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,406.66			
Calculate your monthly net income.					
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,125.13			
23b. Copy your monthly expenses from line 22c above.	23b\$	3,406.66			
	·	-,			
23c. Subtract your monthly expenses from your monthly income.		004 50			
The result is your monthly net income.	23c. \$	-281.53			
4. Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage? No.		ase or decrease because o			
T Voc Explain here:					

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Fill in this infor	mation to identify your	2250:			
Debtor 1					
Debtor 1	Jermall D. Morgar	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number					
f known)					☐ Check if this is an amended filing
ou must file thi	is form whenever you fil	connection with a bank	or amended schedule	s. Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice n, and Signature (Official Form 119
	alty of perjury, I declare	that I have read the sumi	mary and schedules fil	ed with this declaration	on and
X /s/ Jer	mall D. Morgan		X		
Jerma	III D. Morgan ure of Debtor 1		Signature o	f Debtor 2	
Date	September 1, 2017		Date		

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FIII	in this inform	nation to identify you	case:							
Del	btor 1	Jermall D. Morga	Middle Name	Look Nome						
	btor 2 buse if, filing)	First Name	Middle Name	Last Name Last Name						
Uni	ited States Bar	nkruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA						
Car	se number									
	nown)					Check if this is an mended filing				
	ficial Fo				_					
				duals Filing for B		4/16				
info	rmation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you					
Pai	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1.	What is your	current marital statu	s?							
	☐ Married■ Not mar	ried								
2.	During the la	ouring the last 3 years, have you lived anywhere other than where you live now?								
	■ No		•	•						
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .					
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territory co, Texas, Washington and W					
	■ No									
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).						
Pai	rt 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	al amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including partete together, list it only once un		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$55,516.15	☐ Wages, commissions, bonuses, tips	,				
			☐ Operating a business		☐ Operating a business					

		Ca	se 2:17-bk-20	0805-Sk	C Doc 1 File Main Docun		red 09/01/17 16:07	:16 Desc
De	ebtor 1	Je	rmall D. Morgan		Main Bocan		se number (if known)	
							· · · · · · · · · · · · · · · · · · ·	
				Debt	or 1		Debtor 2	
					ces of income ck all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			dar year: December 31, 2016		■ Wages, commissions, bonuses, tips \$45,469.00		☐ Wages, commissions bonuses, tips	,
				Пο	perating a business		☐ Operating a business	
			dar year before that December 31, 2015	. — v	ages, commissions, ses, tips	\$50,354.00	☐ Wages, commissions bonuses, tips	,
				Пο	perating a business		☐ Operating a business	
		No	source and the gross	income fro	m each source separa	itely. Do not include income	that you listed in line 4.	
				Debt	or 1		Debtor 2	
					ces of income ribe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Payments	You Made	Before You Filed for	Bankruptcy		
6.	_	either No.	Neither Debtor 1 rindividual primarily During the 90 days ☐ No. Go to I ☐ Yes List be paid the not income.	hor Debtor for a person before you ine 7. low each cr at creditor. lude payme	nal, family, or househor filed for bankruptcy, d editor to whom you pa Do not include payme ents to an attorney for t	umer debts. Consumer deb old purpose." id you pay any creditor a tot id a total of \$6,425* or more nts for domestic support obl his bankruptcy case.	ots are defined in 11 U.S.C. § all of \$6,425* or more? in one or more payments ar igations, such as child suppor	nd the total amount you ort and alimony. Also, do
	•	Yes.	Debtor 1 or Debto	r 2 or both	have primarily cons	umer debts.		

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Amount you still owe **Creditor's Name and Address Dates of payment Total amount** Was this payment for ... paid

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Deb	otor 1 Jermall D. Morgan	Main Document	Page 35 of 56 Case number (if known)			
	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment tor's name
Par	t 4: Identify Legal Actions, Repossess	sions, and Foreclosures				
	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Within 1 year before you filed for bankru Check all that apply and fill in the details be		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	■ No. Go to line 11.□ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
11	Within 90 days before you filed for bank	Explain what happened		nancial institution	n set off any a	mounts from your
	accounts or refuse to make a payment b No Yes. Fill in the details.		•		,	,,,,
	Creditor Name and Address	Describe the action the	on the creditor took		Date action was Amount taken	
	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?					
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contribution	าร				
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No					
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$60 per person	Describe the gifts		Date the g	s you gave jifts	Value

Address:

Person to Whom You Gave the Gift and

Doc 1 Filed 09/01/17 Entered 09/01/17 16:07:16 Case 2:17-bk-20805-SK Main Document Page 36 of 56 Debtor 1 Jermall D. Morgan Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Gambling \$4.500.00 none various dates in last vear Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred Address or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Offices of Steven B. Lever Flat Fee Retainer \$1,750 and \$335 07-24-2017 & \$2,140.00 200 Pine Avenue, Suite 620 Filing Fee, \$30 Credit Counseling Fee, 08-24-2017 Long Beach, CA 90802 \$25 Debtor's Education Course sblever@leverlaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred payment or transfer was made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details.

Address

Description and value of

property transferred

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

Debtor 1 Jermall D. Morgan

Case number (if known)

		y property to a	a self-settle	d trust or similar device o	of which you are a
Yes. Fill in the details.					
Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	es.	
sold, moved, or transferred? Include checking, savings, money market, or o	ther financial accour	nts; certificate	s of deposi		, ,
■ No	tions, and other finar	ncial institutior	ıs.		
Yes. Fill in the details.					
	•	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, a	ıny safe de _l	posit box or other deposi	tory for securities,
■ No □ Yes. Fill in the details.					
Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Describe	the contents	Do you still have it?
Have you stored property in a storage unit or p	place other than your	home within 1	l year befor	re you filed for bankruptc	y?
■ No □ Yes. Fill in the details.					
Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?		Describe	the contents	Do you still have it?
t 9: Identify Property You Hold or Control for	Someone Else				
Do you hold or control any property that some for someone.	one else owns? Inclu	ude any prope	rty you bor	rowed from, are storing fo	or, or hold in trust
■ No □ Yes. Fill in the details.					
Owner's Name Address (Number, Street, City, State and ZIP Code)			Describe	the property	Value
t 10: Give Details About Environmental Inform	nation				
the purpose of Part 10, the following definitions	s apply:				
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardor toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or					
Site means any location, facility, or property as	s defined under any e		law, wheth	er you now own, operate	, or utilize it or used
· · · · · · · · · · · · · · · · · · ·		as a hazardous	s waste, ha	zardous substance, toxic	substance,
	No Yes. Fill in the details. Name of trust **B*** List of Certain Financial Accounts, Instruction of trust **Within 1 year before you filed for bankruptcy, you sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 year cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or property in a storage unit or property in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) **Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) **Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) **To: Give Details About Environmental Information of the purpose of Part 10, the following definitions of the purpose of Part 10, the following definitions of the purpose of Part 10, the following definitions of the purpose of Part 10, the following definitions of the purpose of Part 10, the following definitions of the purpose of Part 10, the following definitions of the cleanup of these surfaces wastes, or material into the cregulations controlling the cleanup of these surfaces of the purpose of the purpose of the property as to own, operate, or utilize it, including disposal Hazardous material means anything an environmental means anything an environme	No Yes. Fill in the details. Name of trust Description and v Within 1 year before you filed for bankruptcy, were any financial account, nowed, or transferred? Include checking, savings, money market, or other financial account houses, pension funds, cooperatives, associations, and other financial secount houses, pension funds, cooperatives, associations, and other financial No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 year before you filed for cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or place other than your No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or he to it? Address (Number, Street, City, State and ZIP Code) Pyes. Fill in the details. No Yes. Fill in the details. No Yes. Fill in the details. Who else has or he to it? Address (Number, Street, City, State and ZIP Code) Pyes. Fill in the details. Oyou hold or control any property that someone else owns? Include for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Tig: Give Details About Environmental Information the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulations controlling the cleanup of these substances, wastes, or material into the air, land, soil, surface regulations controlling the cleanup of these substances, wastes, or own, operate, or utilize it, including disposal sites.	beneficiary? (These are often called asset-protection devices.) No	beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transformer of the property in the property of the property in a storage unit of place other than your home within 1 year before you filed for bankruptcy, any safe decash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Logical Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you bor for someone. No Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Poscribe Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Poscribe Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Code) No Yes. Fill in the details.	No Yes. Fill in the details. Description and value of the property transferred

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Jermall D. Morgan

Case number (if known)

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No				
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of	any release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any en	vironn	nental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	11: Give Details About Your Business or	Connections to Any Business			
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have a	any of	the following connections to any	business?
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity	y, eith	er full-time or part-time	
	☐ A member of a limited liability comp	any (LLC) or limited liability partners	hip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing ex	ecutive of a corporation			
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation	n		
	■ No. None of the above applies. Go to F	art 12.			
	☐ Yes. Check all that apply above and fill	in the details below for each busines	ss.		
	Business Name Address	Describe the nature of the business	3	Employer Identification number Do not include Social Security I	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idiliber of Triiv.
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement	t to an	nyone about your business? Inclu	de all financial
	No No				
	Yes. Fill in the details below.	Date leaved			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

Part 12	Sign Below		
are true	and correct. I understand that ma	t of Financial Affairs and any attachments, and I decking a false statement, concealing property, or obta up to \$250,000, or imprisonment for up to 20 years,	ining money or property by fraud in connection
/s/ Jer	mall D. Morgan		
	II D. Morgan ure of Debtor 1	Signature of Debtor 2	
Date	September 1, 2017	Date	
Did you	attach additional pages to Your S	tatement of Financial Affairs for Individuals Filing fo	or Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	pay or agree to pay someone who	o is not an attorney to help you fill out bankruptcy fo	rms?
■ No			
☐ Yes.	Name of Person . Attach the	Bankruptcy Petition Preparer's Notice, Declaration, and	Signature (Official Form 119).

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	rmation to identify your			
Debtor 1	Jermall D. Morga	Middle Name	Last Name	
Debtor 2	i iist ivaine	Wildlie Hame	Lastivamo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
(-1, 3,				
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
0				
Case number (if known)				☐ Check if this is an
(ii kilowii)				amended filing
				amended filling
Official Fo		on for Individu	ıals Filing Under	Chapter 7 12/15
Stateme	nt of Intentio	apter 7, you must fill out t		Chapter 7 12/15
Stateme f you are an inc	nt of Intention	apter 7, you must fill out t our property, or	his form if:	Chapter 7 12/15
Stateme f you are an inc creditors hav you have lea you must file th	nt of Intention dividual filing under charge claims secured by your sed personal property his form with the court vever is earlier, unless to	apter 7, you must fill out t our property, or and the lease has not exp within 30 days after you fi	his form if: pired. le your bankruptcy petition or b	Chapter 7 12/15 y the date set for the meeting of creditors, copies to the creditors and lessors you list
f you are an inc creditors have you have lea you must file th which on the	dividual filing under charge claims secured by you sed personal property his form with the court vever is earlier, unless to form	apter 7, you must fill out to our property, or and the lease has not exp within 30 days after you fi the court extends the time	his form if: pired. le your bankruptcy petition or b for cause. You must also send	y the date set for the meeting of creditors,
f you are an ince creditors have you have lea ou must file th which on the f two married p sign a se as complete	nt of Intention dividual filing under charge claims secured by your sed personal property also form with the court of the ever is earlier, unless the form deeple are filing together and date the form.	apter 7, you must fill out to our property, or and the lease has not exp within 30 days after you fi he court extends the time er in a joint case, both are ble. If more space is need	his form if: pired. le your bankruptcy petition or b for cause. You must also send equally responsible for supplyi	y the date set for the meeting of creditors, copies to the creditors and lessors you list

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u></u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Jermall D. Morgan	Case number (if	known)
name: Description of property	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
securing debt:		
Part 2: List Your Unexpired Personal Pr	operty Leases that you listed in Schedule G: Executory Contracts and Une	expired Leases (Official Form 106G), fill
n the information below. Do not list real es	state leases. Unexpired leases are leases that are still in efferoperty lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your unexpired personal proper	ty leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
	ive indicated my intention about any property of my estate thase.	at secures a debt and any personal
χ /s/ Jermall D. Morgan	x	
Jermall D. Morgan Signature of Debtor 1	Signature of Debtor 2	
Date September 1, 2017	Date	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

In r	re Jermall D. Morgan		Case No).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services	
	For legal services, I have agreed to accept		\$	1,750.00	
	Prior to the filing of this statement I have received		\$	1,750.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compared to share th	pensation with any other person	unless they are me	embers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspec	ts of the bankruptc	y case, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] None Other. 	tement of affairs and plan which	n may be required;	-	nkruptcy;
5.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			nces, relief from s	ay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of arbankruptcy proceeding.	ny agreement or arrangement fo	r payment to me fo	r representation of the	e debtor(s) in
_	September 1, 2017 Date	/s/ Steven B Lever 1			
1	Duit	Signature of Attorna Law Offices of S	ey		
		200 Pine Avenue	, Suite 620		
		Long Beach, CA		100	
		(562) 436-5456 I sblever@leverla		986	
		Name of law firm			

Fill in this info	ormation to identify your case:		Ch	ook one	hay anly as d	irected in this form an	d in Form
Debtor 1	Jermall D. Morgan			2A-1Sup		irected in this form and	
Debtor 2	- Corman D. Morgan			Паты	are is no pres	umption of abuse	
(Spouse, if filing)				_	·	·	
United States	s Bankruptcy Court for the: Central District of	California				o determine if a presu nade under <i>Chapter</i> 7	•
Case numbe	r					cial Form 122A-2).	Wound Tool
(if known)						does not apply now be service but it could a	
				☐ Che	ck if this is a	n amended filing	
Official I	Form 122A - 1						
Chapte	r 7 Statement of Your Cui	rent Mor	nthly Inc	ome			12/1
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w if known). If you believe that you are exempted fro tary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additior m a presumption	nal information a of abuse becau	applies. C ise you d	on the top of a	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one or	ıly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Marr	ried and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.			
	ied and your spouse is NOT filing with you.	•	•				
□ Li	ving in the same household and are not lega	Illy separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
p	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	d under nonbar	kruptcy l	aw that applie	es or that you and you	
101(10A). F the 6 month	verage monthly income that you received from all for example, if you are filing on September 15, the 6-m is, add the income for all 6 months and divide the total in the same rental property, put the income from that p	onth period would by 6. Fill in the re	l be March 1 thro sult. Do not inclu	ugh Augus de any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	4,414.38	\$	
3. Alimon	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and roo	ounts from any source which are regularly party our dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	. Include regular d, your depende	r contributions nts, parents,	\$	0.00	\$	
	ome from operating a business, profession,	or farm					
			otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00	Camushana	c	0.00	¢.	
	nthly income from a business, profession, or far	m \$ 0.00 _	Copy here ->	ъ — —	0.00	\$	
6. Net inc	ome from rental and other real property	Deh	otor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	t, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amour the Social Security Act. Instead, list it here:	nt received was a benef	it under					
	For you S	0.0	00_					
^								
	Pension or retirement income. Do not include any and benefit under the Social Security Act.			\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymen imanity, or international	ts or	¢	0.00	¢.		
	•			\$	0.00	\$ \$		
	Total amounts from separate pages, if any.		— .	Φ •	0.00	\$		
				Ψ	0.00	Ψ		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$	4,414.38	+		= \$	4,414.38
							Total cu	rrent monthly
Part	2: Determine Whether the Means Test Applies	to You						
12.	Calculate your current monthly income for the year	r. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	nere=>	\$	4,414.38
	Multiply by 12 (the number of months in a year)						_ x 12	2
	12b. The result is your annual income for this part of the	ne form				12b.	\$5	2,972.56
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	CA						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size					13.	\$5	2,416.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	o online using the link sp kruptcy clerk's office.	ecified	in the separa	te instruc	tions		
14.	How do the lines compare?							
	14a.	On the top of page 1, ch	eck box	1, There is r	no presum	ption of abuse).	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	esumption of	abuse is (determined by	Form 122	?A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	y that the information or	n this sta	atement and	in any atta	chments is tru	ie and coi	rect.
	χ /s/ Jermall D. Morgan							
	Jermall D. Morgan Signature of Debtor 1							
	Date September 1, 2017 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Main Doo	cument Page 45 of 56
Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Case number (if known) Official Form 122A - 2 Chapter 7 Means Test Calculation	2. There is a presumption of abuse.
Be as complete and accurate as possible. If two married peo	chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1). Specifically properties of the second specific specif
 Copy your total current monthly income. Did you fill out Column B in Part 1 of Form 122A-1? No. Fill in \$0 for the total on line 3. Yes. Is your spouse Filing with you? No. Go to line 3. 	Copy line 11 from Official Form 122A-1 here=>\$ 4,414.38

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A–1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

No. Fill in 0 for the total on line 3.

Fill in \$0 for the total on line 3.

☐ Yes.

 \square Yes. Fill in the information below:

State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	Fill in the amount you are subtracting from your spouse's income
	\$
	\$
	\$
Total.	\$ 0.00

Copy total here=>... - \$ _____0.00

4. Adjust your current monthly income. Subtract line 3 from line 1.

4,414.38

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Debtor 1	Jermall D. Morgan		Case number (if known)	
Part 2:	Calculate Your Deductions from Your Income			
to an	nternal Revenue Service (IRS) issues National and swer the questions in lines 6-15. To find the IRS s actions for this form. This information may also be	tandards, go online	using the link specified in the se	
your a	ct the expense amounts set out in lines 6-15 regardles actual expenses if they are higher than the standards. ne in line 3 and do not deduct any operating expenses	Do not deduct any a	mounts that you subtracted fro you	ır spouse's
If you	r expenses differ from month to month, enter the aver	age expense.		
Wher	never this part of the from refers to you, it means both	you and your spouse	if Column B of Form 122A-1 is fill	ed in.
5.	The number of people used in determining your de	eductions from inco	me	
	Fill in the number of people who could be claimed as oblus the number of any additional dependents whom your household.			1
Natio	nal Standards You must use the IRS Nation	nal Standards to ansv	wer the questions in lines 6-7.	
7. ·	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, a Cout-of-pocket health care allowance: Using the number of the dollar amount for out-of-pocket health care. The number of the who are 65 or older-because older people have higher than this IRS amount, you may deduct the additional contents.	and other items. The properties of people you end The properties of people is spaced and the people is spaced and the properties of people is spaced and the properties of people is spaced and the properties of the properties o	ntered in line 5 and the IRS Nation lit into two categoriespeople who ance for health care costs. If your	are under 65 and
Peop	le who are under 65 years of age			
	7a. Out-of-pocket health care allowance per person	\$ 49		
	7b. Number of people who are under 65	X1		
	7c. Subtotal. Multiply line 7a by line 7b.	\$49.00	Copy here=> \$	49.00
Peop	le who are 65 years of age or older			
	7d. Out-of-pocket health care allowance per person	\$117	_	
	7e. Number of people who are 65 or older	X0		
	7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here=> +\$	0.00

7g. Total. Add line 7c and line 7f

49.00

Copy total here=> \$

49.00

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Debtor 1 Jermall D. Morgan Case number (if known)

			_								
Loc	al Sta	andards	You must use the IRS Local S	Standards to ans	swer the quest	ions in lin	nes 8-15.				
			ion from the IRS, the U.S. Tr ses into two parts:	ustee Program	has divided t	he IRS L	₋ocal Stand	ard for housing	g for		
		_	ilities - Insurance and operat ilities - Mortgage or rent exp								
Тоа	answ	er the que	stions in lines 8-9, use the U	I.S. Trustee Pro	ogram chart.						
			online using the link specified be available at the bankruptcy		instructions fo	or this for	m.				
8.			utilities - Insurance and oper nount listed for your county for						s, fill \$		478.00
9.	Hou	sing and	utilities - Mortgage or rent ex	penses:							
	9a.		number of people you entered your county for mortgage or re					\$ 1,6	84.00		
	9b.	Total ave	rage monthly payment for all m	nortgages and o	ther debts sec	ured by y	our home.				
	To calculate the total average monthly payment, add all amounts contractually due to each secured creditor in the 60 months after for bankruptcy. Then divide by 60.										
		Name of	the creditor		Average mo payment	nthly					
		-NONE-			\$						
							•			Repeat this	3
			Total average mont	hly payment	\$	0.00	Copy here=>	-\$	0.00	amount on line 33a.	
	9c.	Net morto	gage or rent expense.								
			ine 9b (total average monthly pense). If this amount is less the				\$	1,684.00	Copy here=>	\$	1,684.00
10.			nat the U.S. Trustee Program Iculation of your monthly ex					g is incorrect a	and	\$	0.00
	Ex	plain why:									
11.	Loc	al transpo	rtation expenses: Check the	number of vehic	cles for which y	ou claim	an ownersh	nip or operating	expense.		
	□ 0	. Go to line	e 14.								
	1	. Go to line	e 12.								
	□ 2	or more.	Go to line 12.								

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

300.00

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Page 48 of 56 Main Document Jermall D. Morgan Debtor 1 Case number (if known) Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Сору **Total Average Monthly Payment** \$ 0.00 0.00 here => -\$ Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0. expense 200.00 200.00 here => \$ Vehicle 2 **Describe Vehicle 2:** 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Сору Repeat this here amount on **Total Average Monthly Payment** Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0. expense 0.00 0.00 here => \$ 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public 0.00 Transportation expense allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

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Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soc your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	sales, or use taxes.	\$	777.50
17.	Involuntary deductions: T contributions, union dues, a	he total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts tha	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	421.33
18.	filing together, include paym	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life nts, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or a spousal or child support payments.		
	Do not include payments or	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required:		
	for your physically or me	entally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments fo	r any elementary or secondary school education.	\$	0.00
22.	that is required for the healt	benses, excluding insurance costs: The monthly amount that you pay for health care h and welfare of you or your dependents and that is not reimbursed by insurance or paid t. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependent	elephone services: The total monthly amount that you pay for telecommunication services its, such as pagers, call waiting, caller identification, special long distance, or business cell it necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
	. ,	r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	150.00
24.	Add all of the expenses al Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	4,698.83

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Add	litional Expense Deductions These are additional deduc	tions allowed by the	e Means Test.			
	Note: Do not include any ex	kpense allowances	listed in lines 6-24.			
25.	Health insurance, disability insurance, and health saving insurance, disability insurance, and health savings accounts your dependents.					
	Health insurance \$	\$ 36.25				
	Disability insurance \$	0.00				
	Health savings account + \$	0.00				
	Total \$	36.25	Copy total here=>	\$	36.25	
	Do you actually spend this total amount?					
	□ No. How much do you actually spend?					
	Yes \$					
26.	Continued contributions to the care of household or fam continue to pay for the reasonable and necessary care and s your household or member of your immediate family who is u	support of an elderly	y, chronically ill, or disabled member of		0.00	
	include contributions to an account of a qualified ABLE progr	· ·	` '	\$	0.00	
27.	Protection against family violence. The reasonably necessafety of you and your family under the Family Violence Prev					
	By law, the court must keep the nature of these expenses co	nfidential.		\$	0.00	
28.	28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.					
	If you believe that you have home energy costs that are more 8, then fill in the excess amount of home energy costs.					
	You must give your case trustee documentation of your actual amount claimed is reasonable and necessary.	al expenses, and y	ou must show that the additional	\$	0.00	
29.	Education expenses for dependent children who are you \$160.42* per child) that you pay for your dependent children public elementary or secondary school.	inger than 18. The who are younger th	monthly expenses (not more than nan 18 years old to attend a private or			
	You must give your case trustee documentation of your actuclaimed is reasonable and necessary and not already account					
	* Subject to adjustment on 4/01/19, and every 3 years after the	hat for cases begur	n on or after the date of adjustment.	\$	0.00	
30.	Additional food and clothing expense. The monthly amou higher than the combined food and clothing allowances in the than 5% of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances of the IRS National States of th	e IRS National Star				
	To find a chart showing the maximum additional allowance, ginstructions for this form. This chart may also be available at	,	·			
	You must show that the additional amount claimed is reason	able and necessary	<i>/</i> .	\$	0.00	
31.	Continuing charitable contributions. The amount that you instruments to a religious or charitable organization. 26 U.S.0		ntribute in the form of cash or financial	+\$	0.00	
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	36.25	

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Dedu								
	ctions for Debt Payment							
	or debts that are secured by an interes ans, and other secured debt, fill in line	st in property that you own, including hones 33a through 33e.	ne mort	gages, ve	hicle			
	calculate the total average monthly pay editor in the 60 months after you file for b	ment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to e	each secu	red			
Mortgages on your home:						Average monthly payment		
33a.	Copy line 9b here				=:	> \$	C	.00
	Loans on your first two vehicles:							
33b.	Copy line 13b here				=:	> \$	0	.00
33c.						> \$	0	.00
3d.	List other secured debts:					_		
Name	of each creditor for other secured debt	Identify property that secures the debt		inclu	payment de taxes o ance?	or		
					No			
	-NONE-					Φ.		
-				_ ⊔	Yes	\$_		
					No			
					Yes	\$		
-						-		
					No			
				_ □	Yes	+\$_		
						7		
	-	20 11 1 20 1			0.00	Copy total	•	0.00
33e.	Total average monthly payment. Add lin	es 33a through 33d	\$		0.00		\$	0.00
84. A ı	e any debts that you listed in line 33 s	es 33a through 33d secured by your primary residence, a vehi pport or the support of your dependents?	icle,		0.00	total	\$	0.00
34. A ı or	re any debts that you listed in line 33 sother property necessary for your sulpho. Go to line 35.	secured by your primary residence, a vehipport or the support of your dependents?	icle,		0.00	total	\$	0.00
34. Aı or	re any debts that you listed in line 33 souther property necessary for your sulpose. No. Go to line 35. Yes. State any amount that you must	secured by your primary residence, a vehipport or the support of your dependents? pay to a creditor, in addition to the payments sion of your property (called the cure amount)	icle,		0.00	total	\$	0.00
34. Ai or ■	re any debts that you listed in line 33 so ther property necessary for your su. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess	secured by your primary residence, a vehipport or the support of your dependents? pay to a creditor, in addition to the payments sion of your property (called the cure amount)	icle,	Total cu amount		total	\$Monthly cur amount	
34. Aı or ■	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments information below.	icle,		re	total	Monthly cur	
84. Ai or	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments information below.	icle,	amount	re	total here=>	Monthly cur	
84. Ai or	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments information below.	icle,	amount	re	total here=>	Monthly cur	
84. Ai or	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments information below. Identify property that secures the debt	icle,	amount	re	total here=>	Monthly cur	0.00
34. Ai or	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments information below. Identify property that secures the debt	icle,	amount	re ÷	total here=>	Monthly cur amount	re e
Name	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the interest of the creditor.	pay to a creditor, in addition to the payments in or your property (called the cure amount information below. Identify property that secures the debt To	icle,	amount	re ÷	total here=>	Monthly cur amount	re e
Name	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the it of the creditor. NE-	pay to a creditor, in addition to the payments in or your property (called the cure amount information below. Identify property that secures the debt To	icle,	amount	re ÷	total here=>	Monthly cur amount	re e
Name -NO ar	No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep possess Next, divide by 60 and fill in the it of the creditor NE- O you owe any priority claims such as the past due as of the filling date of your No. Go to line 36.	pay to a creditor, in addition to the payments ion of your property (called the <i>cure amount</i> information below. Identify property that secures the debt To a priority tax, child support, or alimony - bankruptcy case? 11 U.S.C. § 507.	tal \$	amount	re ÷	total here=>	Monthly cur amount	re e

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Jermall D. Morgan Debtor 1 Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. No. Go to line 37. ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense if you were filing under Chapter 13 0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,698.83 expense allowances Copy line 32, All of the additional expense deductions 36.25 Copy line 37, All of the deductions for debt payment 0.00 4.735.08 4 735 08 Total deductions Copy total here.....=> \$ Part 3: Determine Whether There is a Presumption of Abuse 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 4,414.38 39b. Copy line 38, Total deductions 4,735.08 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy -320.70-320.70 Subtract line 39b from line 39a here=>\$ For the next 60 months (5 years) x 60 Copy -19.242.00 39d. **Total.** Multiply line 39c by 60 39d. -19,242.00 here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41. *Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

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otor 1 Je	ermall D. Morgan	Case number (if known)	
1. 41	 Fill in the amount of your total nonpriority unsecured debt. If you filled A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. 	* x .25	
41	b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i	(i)(l) \$	Copy here=> \$
	Multiply line 41a by 0.25		
25% o	mine whether the income you have left over after subtracting all allowed d if your unsecured, nonpriority debt. the box that applies:	eductions is enough to pay	
	ne 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Th</i> to to Part 5.	nere is no presumption of abu	se.
	ne 39d is equal to or more than line 41b. On the top of page 1 of this form, chesumption of abuse. You may fill out Part 4 if you claim special circumstances.		
4: (Give Details About Special Circumstances		
	nave any special circumstances that justify additional expenses or adjustr	ments of current monthly in	come for which there is r
easona	ble alternative? 11 U.S.C. § 707(b)(2)(B).		
No.	Go to Part 5.		
	Fill in the following information. All figures should reflect your average monthly of item. You may include expenses you listed in line 25.	expense or income adjustmen	t for each
	You must give a detailed explanation of the special circumstances that make th necessary and reasonable. You must also give your case trustee documentatio adjustments.		
	Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
		\$	_
		\$	_
		\$	_
		\$	_
	Sime Dalam		
	Sign Below signing here, I declare under penalty of perjury that the information on this stat	ement and in any attachments	s is true and correct
•		emont and in any addomneria	
_	/s/ Jermall D. Morgan Jermall D. Morgan		
	Signature of Debtor 1		
Dale _	September 1, 2017 MM / DD / YYYYY		

Case 2:17-bk-20805-SK Doc 1 Filed 09/01/17 Entered 09/01/17 16:07:16 Desc Main Document Page 54 of 56 Attorney or Party Name, Address, Telephone & FAX Nos., FOR COURT USE ONLY State Bar No. & Email Address Steven B Lever 200 Pine Avenue, Suite 620 Long Beach, CA 90802 (562) 436-5456 Fax: (562) 485-6886 California State Bar Number: 155082 sblever@leverlaw.com ☐ Debtor(s) appearing without an attorney Attorney for Debtor **UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA** CASE NO .: Jermall D. Morgan CHAPTER: 7

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 2 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Debtor(s).

Date:	September 1, 2017	/s/ Jermall D. Morgan
-		Siganture of Debtor 1
Date:		
-		Signature of Debtor 2 (joint debtor)) (if applicable)
Date:	September 1, 2017	/s/ Steven B Lever
-		Signature of Attorney for Debtor (if applicable)

VERIFICATION OF MASTER MAILING LIST OF CREDITORS

[LBR 1007-1(a)]

In re:

Jermall D. Morgan 12627 Eucalyptus Avenue, #141 Hawthorne, CA 90250

Steven B Lever Law Offices of Steven B. Lever 200 Pine Avenue, Suite 620 Long Beach, CA 90802

American Express PO Box 3001 16 General Warren Blvd. Malvern, PA 19355

Amex Correspondence Po Box 981540 El Paso, TX 79998

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179 Discover Financial Po Box 3025 New Albany, OH 43054

Elan Financial Service Cb Disputes Saint Louis, MO 63166

Navy Federal Cr Union Po Box 3000 Merrifield, VA 22119

Regions Bankcard Attn: Bankruptcy 1900 5th Ave N #300 Birmingham, AL 35203

Usc Credit Union 3720 S Flower St Fl 4 Los Angeles, CA 90007